

Suspend the Rules and Pass the Bill, HR. 2199, with An Amendment

(The amendment strikes all after the enacting clause and inserts a new text)

110TH CONGRESS
1ST SESSION

H. R. 2199

To amend title 38, United States Code, to direct the Secretary of Veterans Affairs to provide certain improvements in the treatment of individuals with traumatic brain injuries, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

Mr. MICHAUD introduced the following bill; which was referred to the Committee on Veterans' Affairs

A BILL

To amend title 38, United States Code, to direct the Secretary of Veterans Affairs to provide certain improvements in the treatment of individuals with traumatic brain injuries, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Traumatic Brain In-
5 jury Health Enhancement and Long-Term Support Act of
6 2007”.

1 **SEC. 2. SCREENING, REHABILITATION, AND TREATMENT**
2 **FOR TRAUMATIC BRAIN INJURY.**

3 (a) SCREENING, REHABILITATION, AND TREATMENT
4 FOR TRAUMATIC BRAIN INJURY.—

5 (1) IN GENERAL.—Chapter 17 of title 38,
6 United States Code, is amended by adding at the
7 end the following new subchapter:

8 “SUBCHAPTER IX—TRAUMATIC BRAIN INJURY
9 “§ 1791. **Screening for traumatic brain injuries**

10 “(a) SCREENING PROGRAM.—The Secretary shall es-
11 tablish a program to screen veterans who are eligible for
12 hospital care, medical services, and nursing home care
13 under section 1710(e)(1)(D) of this title for symptoms of
14 traumatic brain injury.

15 “(b) REPORT.—Not later than one year after the
16 date of the enactment of this section, and annually there-
17 after, the Secretary shall submit to the Committees on
18 Veterans’ Affairs of the Senate and the House of Rep-
19 resentatives a report containing the following information:

20 “(1) The number of veterans screened under
21 the program during the year preceding such report.

22 “(2) The prevalence of traumatic brain injury
23 symptoms among the veterans screened under the
24 program.

1 “(3) Recommendations for improving care and
2 services to veterans exhibiting symptoms of trau-
3 matic brain injury.

4 **“§ 1792. Comprehensive program for long-term trau-**
5 **matic brain injury rehabilitation**

6 “(a) COMPREHENSIVE PROGRAM.—The Secretary
7 shall develop and carry out a comprehensive program of
8 long-term care for post-acute traumatic brain injury reha-
9 bilitation that includes residential, community, and home-
10 based components utilizing interdisciplinary treatment
11 teams.

12 “(b) LOCATION OF PROGRAM.—The Secretary shall
13 carry out the program developed under subsection (a) in
14 four geographically dispersed polytrauma network sites
15 designated by the Secretary.

16 “(c) ELIGIBILITY.—A veteran is eligible for care
17 under the program developed under subsection (a) if the
18 veteran is otherwise eligible for care under this chapter
19 and—

20 “(1) served on active duty in a theater of com-
21 bat operations (as determined by the Secretary in
22 consultation with the Secretary of Defense) during a
23 period of war after the Persian Gulf War, or in com-
24 bat against a hostile force during a period of hos-

1 tilities (as defined in section 1712A(a)(2)(B) of this
2 title) after November 11, 1998;

3 “(2) is diagnosed as suffering from moderate to
4 severe traumatic brain injury; and

5 “(3) is unable to manage routine activities of
6 daily living without supervision or assistance.

7 “(d) REPORT.—Not later than one year after the
8 date of the enactment of this section, and annually there-
9 after, the Secretary shall submit to the Committees on
10 Veterans’ Affairs of the Senate and the House of Rep-
11 resentatives a report containing the following information:

12 “(1) A description of the operation of the pro-
13 gram.

14 “(2) The number of veterans provided care
15 under the program during the year preceding such
16 report.

17 “(3) The annual cost of operating the program.

18 **“§ 1793. Traumatic brain injury transition offices**

19 “(a) ESTABLISHMENT.—The Secretary shall estab-
20 lish a traumatic brain injury transition office at each De-
21 partment polytrauma network site for the purposes of co-
22 ordinating the provision of health-care and services to vet-
23 erans who suffer from moderate to severe traumatic brain
24 injuries and are in need of health-care and services not
25 immediately offered by the Department.

1 “(b) COOPERATIVE AGREEMENTS.—The Secretary,
2 through each such office established under subsection (a),
3 shall have the authority to arrange for the provision of
4 health-care and services through cooperative agreements
5 with appropriate public or private entities that have estab-
6 lished long-term neurobehavioral rehabilitation and recov-
7 ery programs.

8 **“§ 1794. Traumatic brain injury registry**

9 “(a) IN GENERAL.—The Secretary shall establish
10 and maintain a registry to be known as the ‘Traumatic
11 Brain Injury Veterans’ Health Registry’ (in this section
12 referred to as the ‘Registry’).

13 “(b) DESCRIPTION.—The Registry shall include the
14 following information:

15 “(1) A list containing the name of each indi-
16 vidual who served as a member of the Armed Forces
17 in Operation Enduring Freedom or Operation Iraqi
18 Freedom who exhibits symptoms associated with
19 traumatic brain injury and who—

20 “(A) applies for care and services from the
21 Department under this chapter; or

22 “(B) files a claim for compensation under
23 chapter 11 of this title on the basis of any dis-
24 ability which may be associated with such serv-
25 ice; and

1 “(2) any relevant medical data relating to the
2 health status of an individual described in paragraph
3 (1) and any other information the Secretary con-
4 siders relevant and appropriate with respect to such
5 an individual if the individual—

6 “(A) grants permission to the Secretary to
7 include such information in the Registry; or

8 “(B) is deceased at the time such indi-
9 vidual is listed in the Registry.

10 “(c) NOTIFICATION.—The Secretary shall notify indi-
11 viduals listed in the Registry of significant developments
12 in research on the health consequences of military service
13 in the Operation Enduring Freedom and Operation Iraqi
14 Freedom theaters of operations.

15 **“§ 1795. Centers for traumatic brain injury research,
16 education, and clinical activities**

17 “(a) PURPOSE.—The purpose of this section is to
18 provide for the improvement of the provision of health care
19 to eligible veterans with traumatic brain injuries
20 through—

21 “(1) the conduct of research (including research
22 on improving facilities of the Department concen-
23 trating on traumatic brain injury care and on im-
24 proving the delivery of traumatic brain injury care
25 by the Department);

1 “(2) the education and training of health care
2 personnel of the Department; and

3 “(3) the development of improved models and
4 systems for the furnishing of traumatic brain injury
5 care by the Department.

6 “(b) ESTABLISHMENT OF CENTERS.—(1) The Sec-
7 retary shall establish and operate centers for traumatic
8 brain injury research, education, and clinical activities.
9 Such centers shall be established and operated by collabo-
10 rating Department facilities as provided in subsection
11 (c)(1). Each such center shall function as a center for—

12 “(A) research on traumatic brain injury;

13 “(B) the use by the Department of specific
14 models for furnishing traumatic brain injury care;

15 “(C) education and training of health-care pro-
16 fessionals of the Department; and

17 “(D) the development and implementation of
18 innovative clinical activities and systems of care with
19 respect to the delivery of traumatic brain injury care
20 by the Department.

21 “(2) The Secretary shall, upon the recommendation
22 of the Under Secretary for Health, designate the centers
23 under this section. In making such designations, the Sec-
24 retary shall ensure that the centers designated are located
25 in various geographic regions of the United States. The

1 Secretary may designate a center under this section only
2 if—

3 “(A) the proposal submitted for the designation
4 of the center meets the requirements of subsection
5 (e);

6 “(B) the Secretary makes the finding described
7 in subsection (d); and

8 “(C) the peer review panel established under
9 subsection (e) makes the determination specified in
10 subsection (e)(3) with respect to that proposal.

11 “(3) Not more than five centers may be designated
12 under this section.

13 “(4) The authority of the Secretary to establish and
14 operate centers under this section is subject to the appro-
15 priation of funds for that purpose.

16 “(c) PROPOSALS FOR DESIGNATION OF CENTERS.—
17 A proposal submitted for the designation of a center under
18 this section shall—

19 “(1) provide for close collaboration in the estab-
20 lishment and operation of the center, and for the
21 provision of care and the conduct of research and
22 education at the center, by a Department facility or
23 facilities in the same geographic area which have a
24 mission centered on traumatic brain injury care and

1 a Department facility in that area which has a mis-
2 sion of providing tertiary medical care;

3 “(2) provide that no less than 50 percent of the
4 funds appropriated for the center for support of clin-
5 ical care, research, and education will be provided to
6 the collaborating facility or facilities that have a
7 mission centered on traumatic brain injury care; and

8 “(3) provide for a governance arrangement be-
9 tween the collaborating Department facilities which
10 ensures that the center will be established and oper-
11 ated in a manner aimed at improving the quality of
12 traumatic brain injury care at the collaborating fa-
13 cility or facilities which have a mission centered on
14 traumatic brain injury care.

15 “(d) FINDING OF SECRETARY.—The finding referred
16 to in subsection (b)(2)(B) with respect to a proposal for
17 designation of a site as a location of a center under this
18 section is a finding by the Secretary, upon the rec-
19 ommendation of the Under Secretary for Health, that the
20 facilities submitting the proposal have developed (or may
21 reasonably be anticipated to develop) each of the following:

22 “(1) An arrangement with an accredited med-
23 ical school that provides education and training in
24 traumatic brain injury care and with which one or
25 more of the participating Department facilities is af-

1 filiated under which medical residents receive edu-
2 cation and training in traumatic brain injury care
3 through regular rotation through the participating
4 Department facilities so as to provide such residents
5 with training in the diagnosis and treatment of trau-
6 matic brain injury.

7 “(2) An arrangement under which nursing, so-
8 cial work, counseling, or allied health personnel re-
9 ceive training and education in traumatic brain in-
10 jury care through regular rotation through the par-
11 ticipating Department facilities.

12 “(3) The ability to attract scientists who have
13 demonstrated achievement in research—

14 “(A) into the evaluation of innovative ap-
15 proaches to the design of traumatic brain injury
16 care; or

17 “(B) into the causes, prevention, and
18 treatment of traumatic brain injury.

19 “(4) The capability to evaluate effectively the
20 activities of the center, including activities relating
21 to the evaluation of specific efforts to improve the
22 quality and effectiveness of traumatic brain injury
23 care provided by the Department at or through indi-
24 vidual facilities.

1 “(e) PEER REVIEW PANEL.—(1) In order to provide
2 advice to assist the Secretary and the Under Secretary for
3 Health to carry out their responsibilities under this sec-
4 tion, the official within the central office of the Veterans
5 Health Administration responsible for traumatic brain in-
6 jury care shall establish a peer review panel to assess the
7 scientific and clinical merit of proposals that are sub-
8 mitted to the Secretary for the designation of centers
9 under this section.

10 “(2) The panel shall consist of experts in the fields
11 of traumatic brain injury research, education and training,
12 and clinical care. Members of the panel shall serve as con-
13 sultants to the Department.

14 “(3) The panel shall review each proposal submitted
15 to the panel by the official referred to in paragraph (1)
16 and shall submit to that official its views on the relative
17 scientific and clinical merit of each such proposal. The
18 panel shall specifically determine with respect to each such
19 proposal whether that proposal is among those proposals
20 which have met the highest competitive standards of sci-
21 entific and clinical merit.

22 “(4) The panel shall not be subject to the Federal
23 Advisory Committee Act (5 U.S.C. App.).

1 “(f) AWARD OF FUNDING.—Clinical and scientific in-
2 vestigation activities at each center established under this
3 section—

4 “(1) may compete for the award of funding
5 from amounts appropriated for the Department of
6 Veterans Affairs medical and prosthetics research
7 account; and

8 “(2) shall receive priority in the award of fund-
9 ing from such account insofar as funds are awarded
10 to projects and activities relating to traumatic brain
11 injury.

12 “(g) DISSEMINATION OF USEFUL INFORMATION.—
13 The Under Secretary for Health shall ensure that infor-
14 mation produced by the research, education and training,
15 and clinical activities of centers established under this sec-
16 tion that may be useful for other activities of the Veterans
17 Health Administration is disseminated throughout the
18 Veterans Health Administration. Such dissemination shall
19 be made through publications, through programs of con-
20 tinuing medical and related education provided through
21 regional medical education centers under subchapter VI
22 of chapter 74 of this title, and through other means. Such
23 programs of continuing medical education shall receive
24 priority in the award of funding.

1 “(h) SUPERVISION OF CENTERS.—The official within
2 the central office of the Veterans Health Administration
3 responsible for traumatic brain injury care shall be re-
4 sponsible for supervising the operation of the centers es-
5 tablished pursuant to this section and shall provide for
6 ongoing evaluation of the centers and their compliance
7 with the requirements of this section.

8 “(i) AUTHORIZATION OF APPROPRIATIONS.—(1)
9 There are authorized to be appropriated to the Depart-
10 ment of Veterans Affairs for the basic support of the re-
11 search and education and training activities of centers es-
12 tablished pursuant to this section such sums as may be
13 necessary.

14 “(2) In addition to funds appropriated for a fiscal
15 year pursuant to the authorization of appropriations in
16 paragraph (1), the Under Secretary for Health shall allo-
17 cate to such centers from other funds appropriated for
18 that fiscal year generally for the Department of Veterans
19 Affairs medical services account and the Department of
20 Veterans Affairs medical and prosthetics research account
21 such amounts as the Under Secretary for Health deter-
22 mines appropriate to carry out the purposes of this sec-
23 tion.

24 “(j) ANNUAL REPORTS.—Not later than February 1
25 of each of year, the Secretary of Veterans Affairs shall

1 submit to the Committees on Veterans' Affairs of the Sen-
2 ate and House of Representatives a report on the status
3 and activities of the centers for traumatic brain injury re-
4 search, education, and clinical activities during the pre-
5 ceding fiscal year. Each such report shall include the fol-
6 lowing:

7 “(1) A description of the activities carried out
8 at each center and the funding provided by the De-
9 partment for such activities.

10 “(2) A description of the advances made at
11 each of the participating facilities of the center in
12 research, education and training, and clinical activi-
13 ties relating to traumatic brain injury care and
14 treatment.

15 “(3) A description of the actions taken by the
16 Under Secretary for Health pursuant to subsection
17 (g) to disseminate information derived from such ac-
18 tivities throughout the Veterans Health Administra-
19 tion.

20 “(4) The evaluation of the Secretary as to the
21 effectiveness of the centers in fulfilling the purposes
22 of this section.

23 “(k) AUTHORIZATION OF APPROPRIATIONS.—(1)
24 There are authorized to be appropriated to the Depart-
25 ment of Veterans Affairs for the basic support of the re-

1 search and education and training activities of centers es-
2 tablished pursuant to this section amounts as follows:

3 “(A) \$10,000,000 for fiscal year 2008.

4 “(B) \$20,000,000 for each of fiscal years 2009
5 through 2011.

6 “(2) In addition to funds appropriated for a fiscal
7 year pursuant to the authorization of appropriations in
8 paragraph (1), the Under Secretary for Health shall allo-
9 cate to such centers from other funds appropriated for
10 that fiscal year generally for the Department of Veterans
11 Affairs medical services account and the Department of
12 Veterans Affairs medical and prosthetics research account
13 such amounts as the Under Secretary for Health deter-
14 mines appropriate to carry out the purposes of this sec-
15 tion.

16 **“§ 1796. Committee on Care of Veterans with Trau-
17 matic Brain Injury**

18 “(a) ESTABLISHMENT.—The Secretary shall estab-
19 lish in the Veterans Health Administration a committee
20 to be known as the ‘Committee on Care of Veterans with
21 Traumatic Brain Injury’. The Under Secretary for Health
22 shall appoint employees of the Department with expertise
23 in the care of veterans with traumatic brain injury to serve
24 on the committee.

1 “(b) RESPONSIBILITIES OF COMMITTEE.—The com-
2 mittee shall assess, and carry out a continuing assessment
3 of, the capability of the Veterans Health Administration
4 to meet effectively the treatment and rehabilitation needs
5 of veterans with traumatic brain injury. In carrying out
6 that responsibility, the committee shall—

7 “(1) evaluate the care provided to such veterans
8 through the Veterans Health Administration;

9 “(2) identify systemwide problems in caring for
10 such veterans in facilities of the Veterans Health
11 Administration;

12 “(3) identify specific facilities within the Vet-
13 erans Health Administration at which program en-
14 richment is needed to improve treatment and reha-
15 bilitation of such veterans; and

16 “(4) identify model programs which the com-
17 mittee considers to have been successful in the treat-
18 ment and rehabilitation of such veterans and which
19 should be implemented more widely in or through fa-
20 cilities of the Veterans Health Administration.

21 “(c) ADVICE AND RECOMMENDATIONS.—The com-
22 mittee shall—

23 “(1) advise the Under Secretary regarding the
24 development of policies for the care and rehabilita-
25 tion of veterans with traumatic brain injury; and

1 “(2) make recommendations to the Under Sec-
2 retary—

3 “(A) for improving programs of care of
4 such veterans at specific facilities and through-
5 out the Veterans Health Administration;

6 “(B) for establishing special programs of
7 education and training relevant to the care of
8 such veterans for employees of the Veterans
9 Health Administration;

10 “(C) regarding research needs and prior-
11 ities relevant to the care of such veterans; and

12 “(D) regarding the appropriate allocation
13 of resources for all such activities.

14 “(d) ANNUAL REPORT.—Not later than June 1 of
15 2008, and each subsequent year, the Secretary shall sub-
16 mit to the Committees on Veterans’ Affairs of the Senate
17 and House of Representatives a report on the implementa-
18 tion of this section. Each such report shall include the fol-
19 lowing for the calendar year preceding the year in which
20 the report is submitted:

21 “(1) A list of the members of the committee.

22 “(2) The assessment of the Under Secretary for
23 Health, after review of the initial findings of the
24 committee, regarding the capability of the Veterans
25 Health Administration, on a systemwide and facility-

1 by-facility basis, to meet effectively the treatment
2 and rehabilitation needs of veterans with traumatic
3 brain injury.

4 “(3) The plans of the committee for further as-
5 sessments.

6 “(4) The findings and recommendations made
7 by the committee to the Under Secretary for Health
8 and the views of the Under Secretary on such find-
9 ings and recommendations.

10 “(5) A description of the steps taken, plans
11 made (and a timetable for the execution of such
12 plans), and resources to be applied toward improving
13 the capability of the Veterans Health Administration
14 to meet effectively the treatment and rehabilitation
15 needs of veterans with traumatic brain injury.”.

16 (2) CLERICAL AMENDMENT.—The table of con-
17 tents at the beginning of such chapter is amended
18 by adding at the end the following new items:

“SUBCHAPTER IX—TRAUMATIC BRAIN INJURY

“1791. Screening for traumatic brain injuries.

“1792. Comprehensive program for long-term traumatic brain injury rehabilita-
tion.

“1793. Traumatic brain injury transition offices.

“1794. Traumatic brain injury registry.

“1795. Centers for traumatic brain injury research, education, and clinical ac-
tivities.

“1796. Committee on Care of Veterans with Traumatic Brain Injury.”.

19 (b) EFFECTIVE DATE.—The Secretary shall imple-
20 ment the requirements of subchapter IX of title 38,

1 United States Code, as added by subsection (a), not later
2 than 180 days after the date of the enactment of this Act.

3 **SEC. 3. PILOT PROGRAM FOR DELIVERY OF CERTAIN SERV-**
4 **ICES TO VETERANS THROUGH MOBILE VET**
5 **CENTERS.**

6 (a) PILOT PROGRAM.—Chapter 17 of title 38, United
7 States Code, is amended by inserting after section 1712B
8 the following new section:

9 **“§ 1712C. Pilot program for delivery of certain serv-**
10 **ices through mobile Vet Centers**

11 “(a) PILOT PROGRAM.—To improve access to mental
12 health services in rural areas, the Secretary shall carry
13 out a pilot program under which the Secretary shall pro-
14 vide readjustment counseling, related mental health serv-
15 ices, benefits outreach, and, to the extent practicable, as-
16 sistance with claims for benefits under this title through
17 the use of mobile centers (as that term is defined in sec-
18 tion 1712A(i)(1)), to be known as ‘mobile Vet Centers’.
19 In carrying out the pilot program, the Secretary shall de-
20 termine the most effective manner in which to operate the
21 mobile Vet Centers.

22 “(b) SCOPE AND LOCATION.—(1) The Secretary shall
23 establish two mobile Vet Centers in each of the following
24 five Veterans Integrated Service Networks:

1 “(A) Veterans Integrated Service Network

2 1.

3 “(B) Veterans Integrated Service Network

4 16.

5 “(C) Veterans Integrated Service Network

6 19.

7 “(D) Veterans Integrated Service Network

8 20.

9 “(E) Veterans Integrated Service Network

10 23.

11 “(2) Within each Veterans Integrated Service Net-
12 work under paragraph (1), the Secretary shall determine
13 the area to be serviced by each mobile Vet Center. In mak-
14 ing that determination, the Secretary shall give priority
15 to areas in which limited mental health and outreach serv-
16 ices are available.

17 “(3) If the Secretary determines that mobile Vet Cen-
18 ters in addition to such centers required under paragraph
19 (1) are warranted, the Secretary may establish additional
20 mobile Vet Centers and may establish such centers in Vet-
21 erans Integrated Service Networks other than the Vet-
22 erans Integrated Service Networks referred to in that
23 paragraph. Upon such a determination by the Secretary,
24 the Secretary shall notify the Committees on Veterans’ Af-

1 fairs of the Senate and House of Representatives of such
2 determination.

3 “(c) TERMINATION.—The authority to carry out a
4 pilot program under this section shall terminate on the
5 date that is three years after the date of the enactment
6 of this section.

7 “(d) REPORT.—Not later than 90 days after the date
8 on which the pilot program terminates under subsection
9 (a), the Secretary shall submit to the Committees on Vet-
10 erans’ Affairs of the Senate and House of Representatives
11 a report on the pilot program. Such report shall describe
12 how the Secretary established and carried out the pilot
13 program and include an evaluation of the Secretary of the
14 benefits and disadvantages of providing readjustment
15 counseling, related mental health services, benefits out-
16 reach, and claims assistance through the use of mobile
17 Vets Centers.

18 “(e) AUTHORIZATION OF APPROPRIATIONS.—There
19 is authorized to be appropriated to carry out this section
20 \$7,500,000 for fiscal year 2008 and each subsequent fiscal
21 year.”.

22 (b) CLERICAL AMENDMENT.—The table of sections
23 at the beginning of such chapter is amended by inserting
24 after the item related to section 1712B the following new
25 item:

“1712C. Pilot program for delivery of certain services through mobile Vet Centers.”.

1 **SEC. 4. ADVISORY COMMITTEE ON RURAL VETERANS.**

2 (a) ESTABLISHMENT OF COMMITTEE.—Subchapter
3 III of chapter 5 of title 38, United States Code, is amend-
4 ed by adding at the end the following new section:

5 **“§ 546. Advisory Committee on Rural Veterans**

6 “(a) ESTABLISHMENT.—(1) The Secretary shall es-
7 tablish an advisory committee to be known as the ‘Advi-
8 sory Committee on Rural Veterans’ (hereinafter in this
9 section referred to as ‘the Committee’).

10 “(2)(A) The Committee shall consist of members ap-
11 pointed by the Secretary from the general public, includ-
12 ing—

13 “(i) representatives of rural veterans;

14 “(ii) individuals who are recognized authorities
15 in fields pertinent to the needs of rural veterans, in-
16 cluding specific or unique health-care needs of rural
17 veterans and access issues of rural veterans;

18 “(iii) individuals who have expertise in the de-
19 livery of mental health care in rural areas;

20 “(iv) individuals who have expertise in the deliv-
21 ery of long-term care in rural areas;

22 “(v) at least one veterans service organization
23 representative from a rural State; and

1 “(vi) representatives of rural veterans with
2 service-connected disabilities.

3 “(B) The Committee shall include, as ex officio mem-
4 bers—

5 “(i) the Secretary of Health and Human Serv-
6 ices (or a representative of the Secretary of Health
7 and Human Services designated by that Secretary);

8 “(ii) the Director of the Indian Health Service
9 (or a representative of that Director); and

10 “(iii) the Under Secretary for Health and the
11 Under Secretary for Benefits, or their designees.

12 “(C) The Secretary may invite representatives of
13 other departments and agencies of the United States to
14 participate in the meetings and other activities of the
15 Committee.

16 “(3) The Secretary shall determine the number,
17 terms of service, and pay and allowances of members of
18 the Committee appointed by the Secretary, except that a
19 term of service of any such member may not exceed three
20 years. The Secretary may reappoint any such member for
21 additional terms of service.

22 “(b) RESPONSIBILITIES OF COMMITTEE.— The Sec-
23 retary shall, on a regular basis, consult with and seek the
24 advice of the Committee with respect to the administration
25 of benefits by the Department for rural veterans, reports

1 and studies pertaining to rural veterans, and the needs
2 of rural veterans with respect to primary care, mental
3 health care, and long-term care needs of rural veterans.

4 “(c) REPORT.—(1) Not later than September 1 of
5 each odd-numbered year until 2013, the Committee shall
6 submit to the Secretary a report on the programs and ac-
7 tivities of the Department that pertain to rural veterans.

8 Each such report shall include—

9 “(A) an assessment of the needs of rural vet-
10 erans with respect to primary care, mental health
11 care, and long-term care needs of rural veterans and
12 other benefits and programs administered by the
13 Department;

14 “(B) a review of the programs and activities of
15 the Department designed to meet such needs; and

16 “(C) such recommendations (including rec-
17 ommendations for administrative and legislative ac-
18 tion) as the Committee considers appropriate.

19 “(2) The Secretary shall, within 60 days after receiv-
20 ing each report under paragraph (1), submit to Congress
21 a copy of the report, together with any comments con-
22 cerning the report that the Secretary considers appro-
23 priate.

1 “(3) The Committee may also submit to the Sec-
2 retary such other reports and recommendations as the
3 Committee considers appropriate.

4 “(4) The Secretary shall submit with each annual re-
5 port submitted to Congress pursuant to section 529 of this
6 title a summary of all reports and recommendations of the
7 Committee submitted to the Secretary since the previous
8 annual report of the Secretary submitted pursuant to that
9 section.”.

10 (b) CLERICAL AMENDMENT.—The table of sections
11 at the beginning of such chapter is amended by adding
12 at the end the following new item:

“546. Advisory Committee on Rural Veterans.”.